

# CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK

(1) ANDREW SIAL  
Name

(2) 2548 Oracle Lane  
Address (number and street)

North Port FL 34286  
City, State, Zip Code

**OFFICE USE ONLY** 8:42:14  
CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- |  |                      |  |
|--|----------------------|--|
| <input checked="" type="checkbox"/> Candidate  | Office Sought: _____ | <input type="checkbox"/> Check here if PC or ECO has disbanded                 |
| <input type="checkbox"/> Political Committee (PC)  |                      | <input type="checkbox"/> Check here if PTY has disbanded                       |
| <input type="checkbox"/> Electioneering Communications Org. (ECO)  |                      | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY)   |                      |  |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) |                      |  |

### (5) Report Identifiers

Cover Period: From 7/27/24 To 8/2/24 Report Type: \_\_\_\_\_

- Original       Amendment       Special Election Report

**(6) Contributions This Report**

Cash & Checks      \$       , ~~0~~, ~~0~~.~~0~~

Loans                      \$       , ~~0~~, ~~0~~.~~0~~

Total Monetary      \$       , ~~0~~, ~~0~~.~~0~~

In-Kind                    \$       , ~~0~~, ~~000~~.~~00~~

**(7) Expenditures This Report**

Monetary Expenditures      \$       , ~~0~~, ~~0~~.~~0~~

Transfers to Office Account      \$       , ~~0~~, ~~0~~.~~0~~

Total Monetary      \$       , ~~0~~, ~~000~~.~~00~~

**(8) Other Distributions**  
\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**  
\$       , ~~5~~, ~~528~~.~~38~~

**(10) TOTAL Monetary Expenditures To Date**  
\$       , ~~5~~, ~~004~~.~~18~~

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Robert J. Sisson

- Individual (only for IE or electioneering comm.)     Treasurer     Deputy Treasurer

X   
Signature

(Type name) ANDREW SIAL

- Candidate       Chairperson (only for PC and PTY)

X   
Signature